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American Public Health Association

1015 Fifteenth Street, NW Washington, DC 20005-2605 202/789-5600 December 19, 1996

FEDERAL COMMUNICATIONS COMMISSION OFFICE OF SECRETARY

Office of the Secretary Federal Communications Commission, Room 222 1919 M Street, NW Washington, DC 20554

To whom it may concern:

Here are the comments of the American Public Health Association (APHA) on the Federal Communications Commissions (FCC) proposed regulations to implement the 1996 Telecommunications Act. We thank the FCC for giving us the opportunity to provide input into this important process.

If you have further questions, please contact Eric Juzenas, Health Policy Analyst, at 202-789-5628. Thank you.

Sincerely,

Katherine S. McCarter, MHS Acting Executive Director

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Enclosures

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To:

Office of the Secretary

Federal Communications Commission, Room 222

1919 M Street, NW Washington, DC 20554

1015 Fifteenth Street, NW Washington, DC 20005-2605 202/789-5600

Re:

CC Docket No. 96-45, Health Provisions of the 1996

Telecommunications Act

Contact: Eric Juzenas, MPH, JD | 202-789-5628 |

eric.juzenas@msmail.apha.org

COMMENTS OF THE AMERICAN PUBLIC HEALTH ASSOCIATION

I. **Introduction**

The American Public Health Association (APHA) thanks the Federal Communications Commission (FCC) for the opportunity to comment on their regulations to implement the 1996 Telecommunications Act. The APHA supports the recommendations made by the FCC Advisory Committee; however, we are quite concerned that the definition of health care selected by the Advisory Committee focuses primarily on medical care and would exclude many vital public health services from eligibility for the subsidized rates. In our view, this would directly contravene the intent of the subsidy which was to promote the health of all Americans: public health services play at least an equal role to medical care services in promoting the health of the American population. We urge the Commission to include public health services within its definition of those "essential for the provision of health care".

The APHA is the oldest and largest organization of public health professionals in the world, representing more than 50,000 people from over 50 disciplines in public health. Our constitutional purpose is to protect and promote personal and environmental health. The APHA's programs are focused on the review of the scientific bases for public health programs and policies; identification of impending scientific and practice problems and their potential effects on the public and the environment; and advancement of public health practice. These comments have been prepared from comments received from an expert cross-section of our membership.

II. Specific Comments on Proposed Rule

A. The Special Needs of Rural Areas for Better Public Health Access

- Public health has played a vital role in protecting and promoting the health of rural communities across the nation. In many of these communities, public health offices and personnel are the only providers of health services. Essential public health services provided in rural areas include:
 - + Monitoring health status to identify community health problems
 - + Diagnosing and investigating health problems and health hazards in the community
 - + Informing, educating, and empowering people about health issues
 - + Mobilizing community partnerships to identify and solve health problems
 - + Developing policies and plans that support individual and community health efforts
 - + Enforcing laws and regulations that protect health and ensure safety
 - + Linking people to needed personal health services and assuring the provision of health care when otherwise unavailable
 - + Assuring a competent public health and personal health care work force
 - + Evaluating effectiveness, accessibility, and quality of personal and population-based health service
 - + Researching for new insights and innovative solutions to health problems.

Many of these functions are extremely dependent upon communication of data and information and ultimately require sophisticated information networks. Some specific examples are given below.

B. The Link Between Public Health and Health Care

Tracking and Responding to Emerging Diseases

Identifying and responding to emerging diseases and epidemics is one of the core functions of public health. The nature of response is such that it can often require the concerted efforts of a wide-variety of experts who can be spread out across the nation -- from the local health departments to federal agencies to disease experts. Telecommunications access can help public health workers communicate information regarding the outbreak or disease in order to more efficiently formulate and implement a response.

Communication access is also vital for another reason, rural employment is often based on farming, ranching, fishing, forestry, mining, or other small industries that generally pay low wages, pose high health risks, and do not provide health insurance coverage. Because much rural work is also seasonal, many local residents are employed only part of the year or are migrant workers. Tracking these workers can be tremendously difficult and requires the development of data networks that are accessible from many points. Local and state health departments need ready access to the data in order to track, monitor, and respond to emerging disease patterns and outbreaks.

• Linking the Public to Information Resources for Prevention

Increasingly, a wide variety of public health information is made available to the public and health care workers via the Internet. Important community sources of information such as health departments, WIC clinics, or other social service programs can be important providers that information and offer interaction via the Internet, especially the World Wide Web (WWW). This type of information dissemination can play an important role in health information dissemination and education.

Recent infant mortality rates for the United States already lag behind many industrialized countries, and those rates are even higher in rural areas. Public health workers and educators that Page 4
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need to have the means to get access and convey information to rural residents about good health practices. A lot of this can occure via e-mail or the Internet. These workers also need to be able to track and follow up with at-risk populations. This again requires the development of sophisticated and accessible data and information networks.

- Continuing Education -- What we know about health and how to promote it is constantly changing. Continuing public health education is indispensable for maintaining the high standards of skill and knowledge that we have come to expect from our health professionals as science and technology evolves. In rural communities accessing those continuing education opportunities can be exceedingly difficult. Having affordable access to telecommunications links can help alleviate this problem since bandwith from basic ISDN (56-128 kb/s) to full T-1 (1.544 mb/s) is sufficient to participate in most distance-based learning networks in operation today. The Center for Disease Control and Prevention's Public Health Training Network, for example, broadcasts programs that address a wide array of preventive services. Many academic education centers are also beginning to also provide distance-based continuing education programs.
- Facilitating Continuity of Care -- Providers in private and public clinics need to be linked to one another and to their patients to improve continuity of care and to influence health practices. Low-bandwith applications such as e-mail have already been shown to significantly aid this practice.
- Consultation and Expert Advice -- Through provide-toprovider and provider-to-public health linkage, providers need to have access to expert advice and to share experience with one another. Coordination among rural providers is particularly important because they often lack the opportunity to see colleagues in the course of daily business. Internet connections providing e-mail and access to technical and practice information is available today at 56kb and greater bandwith.
- Emergency Notification and Disaster Response -- E-mail and video conferencing (1.5 mb) has proven to improve coordination among providers in emergency situations, and most types of emergency response, ranging from natural disasters to disease outbreaks. Telecommunications

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technologies such as e-mail, are increasingly used to improve response to outbreaks of drug-resistant organisms through providing emergency alerts directly to care providers

The Georgia Information Network for Public Health Officials, for instance, was the most extensively used communications medium during the 1995 flooding of south Georgia. Similarly, CDC WONDER was used by the Iowa State Health Department to coordinate activities during the Mississippi River floods of 1994. Keeping public and private providers in contact with one another is possible through e-mail at low bandwiths and provides highly valuable service to the public.

III. Conclusion

These are just a few of the ways that telecommunications access is important to public health. What we hope the Commission will take from these comments is that telecommunications access is important to public health and that public health is vital to the well-being of the American population. Therefore, we strongly recommend that the Commission include public health providers among those eligible for the telecommunications subsidy.